# 3031060910

FE5AN018

FEC FORM 3

## REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

om2813 APR 18 AM 11: 34

COMMITTEE (in full)	ITPE OR PRIN		example: If typing, type over the lines.	12FE4M5	FEU MAIL GENTL
COMMITTEE	TO ELECT	LEYVA FOR	U.S. CONGRESS	<u> </u>	
<u> </u>	1 1 1 1 1	<u> </u>	1:11:1:		:
ADDRESS (number and street)	10027	7 4th Stree	t <sub></sub>	<u> </u>	
Check if different	<u> </u>	<u> </u>	<u>''                                     </u>	<u> </u>	
than previously reported. (ACC)	Highl	land		I N 463	322
2. FEC IDENTIFICATION NU	IMBER ▼	CITY		STATE	ZIP CODE A STATE ▼ DISTRICT
C0035743	4	3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	IN 0-1
4. TYPE OF REPORT (Cho	ose One)	(b) 12-Day <b>PF</b>	RE-Election Report for the	:	
April 15 Quarterly R	eport (Q1)		Primary (12P)  Convention (12C)	General (12G) Special (12S)	Runoff (12R)
July 15 Quarterly Ro		Election o	כ פ זי גע חס	y - 7 - 9 - 9	in the State of
January 31 Year-End	d Report (YE)	(c) 30-Day PC	OST-Election Report for the	ne:	
	i		General (30G)	Runoff (30R)	Special (30S)
Termination Report (	(TER)	Election o	u a ta	, , , ,	in the State of
5. Covering Period O	ďf	2013	through O	3 31 ´	2013
certify that I have examined this	s Report and to	the best of my	knowledge and belief it is	true, correct and co	mplete.
Type or Print Name of Treasurer	Mark	J. Leyva			
Signature of Treasurer	Mar	690	Legra	Date $O''$	10 2013
NOTE: Submission of false, errone	ous, or incomple	ete Information ma	y subject the person signir	ng this Report to the p	enalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3 (Revised 02/2003)

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7	

#### **SUMMARY PAGE**

of Receipts and Disbursements

Page 2

(subtract Line 6(b) from Line 6(a)).....

(from Line 17) .....

Expenditures (from Line 14).....

(subtract Line 7(b) from Line 7(a)) .....

Reporting Period (from Line 27).....

Schedule C and/or Schedule D) .....

Schedule C and/or Schedule D) .....

FEC Form 3 (Revised 02/2003). Write or Type Committee Name Report Covering the Period: From: Net Contributions (other than loans) (a) Total Contributions (other than loans) (from Line 11(e)) .... Total Contribution Refunds (from Line 20(d)) ..... (c) Net Contributions (other than loans)

Net Operating Expenditures

(b) Total Offsets to Operating

(c) Net Operating Expenditures

Debts and Obligations Owed TO

the Committee (Itemize all on

10. Debts and Obligations Owed BY the Committee (Itemize all on

Cash on Hand at Close of

**Total Operating Expenditures** 

**COLUMN A COLUMN B** This Period **Election Cycle-to-Date** 

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

9.

### $\sim$ 3105091 M O

#### **DETAILED SUMMARY PAGE**

of Receipts

Page 3

FEC Form 3 (Revised 02/2003)

Write	or	Type	Committee	Name
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COMMITTEE	m n	EY EVVD	T 127VT/78	EOD	77 C	CONTORRECC
COMMITTEE	TU	FULCT	LEIVA	ruk	U.S.	CUNGRESS

. Report Covering the Period:

From:

01 01 2013

0.3 3.1 2013

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than		
	Political Committees	Landing describer of the section of	102000
	(i) Itemized (use Schedule A)	114000	1,9,20,00
	(ii) Uniternized	0	0
	(iii) TOTAL of contributions	Language contributes the contributes the contributes the contributes the contributes of the contributes the co	Consideration of the second se
	from individuals	1,14000	192000
		A sea district distri	Anne villa sanda ocea di este all'antica di antica di an
	(b) Political Party Committees	Investigation to the second and the	
	(c) Other Political Committees	- Continue deservations describerations descri	Sansanding and manufactural from the form of the manufactural sansand
	(such as PACs)	Secured Secured Process Description of the security of the sec	Transmitter and the second and the s
	(d) The Candidate	0	e
	(e) TOTAL CONTRIBUTIONS	Transmitters and transmitters are transmitters are transmitters and transmitters are transm	Commission of the commission o
	(other than loans)	รีงาน การเก็บเกรามเก็บเลยเหมืองการเก็บการเหมืองการเหมืองการเก็บการเหมืองการเหมืองการเหมืองการเก็บการเหมืองการใ	Green the residence of the second
	(add Lines 11(a)(iii), (b), (c), and (d))	1,140,00	1,920,00
12.	TRANSFERS FROM OTHER	Total consider an authorizen ertillaren until moneyalle, moneyalle manachen ertille moneyalle ertille ertille	demantication to the second transmission of terms of the second transmission of the second transmission of the second
	AUTHORIZED COMMITTEES	The second secon	
13.	LOANS:		
	(a) Made or Guaranteed by the	innerelle monthement and man to the construction of the constructi	
	Candidate		
		Sandan Sanda	in the second se
	(b) All Other Loans(c) TOTAL LOANS	The results and the result that is the continue of the results and the results are the results and the results are the results and the results are the results	The same of the sa
	(add Lines 13(a) and (b))		A
	(200 2:100 10(4) 2:10 (2)	heavel and a slee call born Lancaria and Paradian advantillaceaders and a	Succeeding the said of the sai
14.	OFFSETS TO OPERATING		
	EXPENDITURES		Company of the second s
	(Refunds, Rebates, etc.)	The second secon	Secretario de la companya del companya de la companya del companya de la companya
15.	OTHER RECEIPTS	to the second control of the second control	Langer Steiner Steine S
	(Dividends, Interest, etc.)		hand the state of
16.	TOTAL RECEIPTS (add Lines		
	11(e), 12, 13(c), 14, and 15)	114000	197000
	(Carry Total to Line 24, page 4)	the college the said and some free the section of the said security week week	hand and and bearing the said of the said on the said on the

FEC Form 3 (Revised 02/2003).

of Disbursements

Page 4

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	1,1.63.15	, 2,175,15
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	process production of a grant of a section of the s	The state of the s
	(b) Of All Other Loans	and a second and a second seco	A sea of the sea of th
	(add Lines 19(a) and (b))	Sand the contract of the contract of the contract of the contract of	The same of the Manual Court of Manual Court of the State of
20.	REFUNDS OF CONTRIBUTIONS TO:  (a) Individuals/Persons Other  Than Political Committees	La de la	
	(b) Political Party Committees	the control of the second seco	The state of the control of the state of the
	(such as PACs)	The Survey Survey State of the Survey Property of the Survey Surv	A company of the second of the
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	Continue and personal continue and accomplishing and the continue and the	Para Para Para Para Para Para Para Para
21.	OTHER DISBURSEMENTS	The state of the s	E
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	1,163,15	2,175,15
*****	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	rting period	, 52,32
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	, 1,140,00
25.	SUBTOTAL (add Line 23 and Line 24)		, 1,192,32
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	1,163.15
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)	G PERIOD	, , , 29.17

### SCHEDULE A (FEC Form 3)

Use separate schedule(s)

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C	he	ck only	one)			
	X	11a	11b [	11c [	11d	
		12	13a	13b	14	15

remized	RECEIPTS		1	for each category of to Detailed Summary Pa		X	11a	1	11b		11c	11d	_	. 1
	····			·			12		3a_	$\square$	<u>13</u> b	14		15
				y not be sold or used to ddress of any political c										
NAME OF	COMMITTEE (In Full	1)												
/	COMMI	CTTEE TO	ELECT. LEA	A FOR U.S. CON	GRESS			٠						į
·	(Last, First, Middle II	•	URNAM	ENT										
Mailing Add	dress					1	ate of		•	D	, v	v v	<b>v</b>	
	<u> 328</u> .	5 GLE		DYER 2D			3 1	•	Ĩ1_	3		201	3	
City	LYNWO	00	State ) L	Zin Code 60 411			-							
	nber of contributing tical committee.	l	C 0 0	3 5 7 4 3 4		Ar	nount	of E	Each	Rec		s Period		_
Name of Er	mployer		Occupation				4.3	! 	,	4		? 40. @ #		
Receipt For	r:		Election Cy	cle-to-Date _		1						Oppoi		
Prima	• •	ıl			_		Spe	endi	ng (2	U.S	S.C. §4	41a(i)/44	1a-1	)
Other	r (specify) ▼  Off Yea	ir-		, 1,020	. 00									
Full Name	(Last, First. Middle I	Initial)	TOURNA	4ment		D	ate of	Rec	eipt					
	A 4 - 11 A - 3 - 4						мм	,	D	D	/ Y	6 1	ž	
City	City State Zip Code  LYNWOOD IL GO 411				Ľ				<i>_</i>			<u> </u>		
EEC ID nu	mber of contributing		•• •••	the state of the s		-								
	itical committee.	,	C 0 0	3 5 7 4 3 4		A	mount	of	Each	Red	eipt th	is Perio	d	
Name of E	mployer	· .	Occupation			+					4	100	0	0
							20 ENTRIES @ -			_				
Receipt Fo	_		Election Cy	cle-to-Date ▼	. 00	]	Lin	nits	Incre	ase	d Due i	o Oppo 41a(i)/4	nent'	's
	(Last, First, Middle 8 BA	Initial)	OURN AV	newT		D	ate of	Red	ceipt			··-		
Mailing Ad			LENWOO		RD									
City	LYNW	000	State /L	Zip Code 66411										
	mber of contributing itical committee.	3	C 0 0	3 5 7 4 3 4		Δ	mount	t of	Each	Re	ceipt th	is Perio	d	
Name of E	mployer		Occupation			1			,		, 4	100	, 0	)O
Receipt Fo	t For: Election C			/cle-to-Date		١.	20 ENTRIES @ #				@ #	20	lea	
Prim	· L	ai		<b>V</b>		Limits Increased Due to Opport Spending (2 U.S.C. §441a(i)/44		onent	's					
Othe	er (specify)   Off Ye	061		, 1,82	700		-	_ J. 10	~ <del></del> (	_ •	-·-· 3			٠,
SUBTOTAL						<del></del>			,		1,0	9 40	, 0	<u> </u>

### SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	LINE	MOWREK:	PAGE	- NO	<u></u>
(che	ck only	/ one)		-	
X	]11a	11b	11c	11d	_
	12	13a	13b	14_	15
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IEMIZED RECEIPIS	Detailed Summary Page	11a   11b   11c   11d   12   13a   13b   14   15
	Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
COMMITTEE TO	ELECT LEYVA FOR U.S. CONGRESS	
Full Name (Last, First, Middle Initial)		
COLAKOVIC	, ALEX	Date of Receipt
Mailing Address		l .
8791 MON	State Zip Code	02 10 2013
City MUNSTER	1N 46321	
FEC ID number of contributing federal political committee.	C 0 0 3 5 7 4 3 4	Amount of Each Receipt this Period
Name of Employer	Occupation	, , 50,60
Receipt For:    Primary   General	Election Cycle-to-Date	Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)
Other (specify) Veav	, , 50.00	Specially (2 sisser 3.112()) 4112 1)
Full Name (Last, First. Middle Initial)	, ALEX	Date of Receipt
Mailing Address	IZOE AVE,	03 10 2013
MUNSTER	State Zip Code LN 46.3.2.1	
FEC ID number of contributing federal political committee.	C 0 0 3 5 7 4 3 4	Amount of Each Receipt this Period
Name of Employer	Occupation	, , 50.00
Receipt Foc:	Election Cycle-to-Date	Limite Increased Due to Company
Primary General		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)
Other (specify) $\forall$	, , , , , , , 00 . 00	
Full Name (Last, First, Middle Initial)	<del>-  </del>	
		Date of Receipt
Mailing Address		M M / D D / Y Y Y
City	State Zip Code	1
<u> </u>	·	
FEC ID number of contributing federal political committee.	C 0 0 3 5 7 4 3 4	Amount of Each Receipt this Period
Name of Employer	Occupation	<del>-</del>
Receipt For:	Election Cycle-to-Date	+
Primary General		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)
Other (specify) ▼	g g 4	Sporting (2 0.0.0. 311 later)
SUBTOTAL of Receipts This Page (optional).	<b>•</b>	, , 100,0

# 3031060916

SCHEDULE B	(FEC Form 3)
ITEMIZED DIS	BURSEMENTS

V	ΙE	NUMBE	R:	PAGE		<u> </u>	
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		20a	20b		20c		21

SCHEDULE B (FEC Form 3)		FOR LINE NUMBER: PAGE / OF 4
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)
	Detailed Summary Page	20a 20b 20c 21
Any information copied from such Reports and Statements m or for commercial purposes, ether than using the name and a		
NAME OF COMMITTEE (In Full)	address of any political committee	co to solide solidibations from cash committee.
COMMITTEE TO ELECT LEYVA FOR U.S.	CONGRESS	
Full Name (Läst, First, Middle mitiar)		Date of Disbursement
A. BRIDGES, KEVIN		
Mailing Address 7370 LENBURG PD	<b>)</b>	01/13/2013
City PORTAGE IN	Zip Code 46368	Amount of Each Disbursement this Period
Purpose of Disbursement 1ST PL-8 BALL 7	TOURNEY 003	100,00
Candidate Name MARK J. LEY		us.
Office Sought: X House Disbursement For Senate Primary		Contributions Required Under 11 C.F.R. 400.53
President Other (s	pecify) $\forall$	
State: District: U1 Full Name (Last, First, Middle Initial)	047 / 011	
B. VETTAS, TASOS		Date of Disbursement
Mailing Address  8 7.5 W. 70TH AV  City State	IF	011/13/2013
City WERRIUVILLE IN	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement 2 NPL - 8 BALL		10000
Candidate Name	/ CARLON-BERNINGER	585
Office Sought: X House   Disbursement For	71.	Refund or Disposal of Excess Contributions Required Under
Senate Primary		11 C.F.R. 400.53
State: IN District: 01 Other (s	off Year	
Full Name (Last, First, Middle Initial)		Date of Disbursement
C. JAEGER, TOM		
Mailing Address 660 E. U.S. Hwy	6	01/13/2013
City WESTVILLE /N 1	p Code 16391	Amount of Each Disbursement this Period
Purpose of Disbursement 3 RD PL - 8 BAL	L Tourney 00	3 4.0,0,0
Candidate Name  MARX J. LEYVI	Category Type	/ Refund or Diaposal of Excess
Office Sought:		Contributions Required Under 11 C.F.R. 400.53
State: IN President Other (s	off Year	
		24000
SUBTOTAL of Disbursements This Page (optional)		<u> </u>
TOTAL This Period (last page this line number only)		

SCHEDULE B	(FEC Form	3)
ITEMIZED DISI	BURSEMENT	rs

Use separate schedule(s) from the property of the botalial Summary Page (schedule(s) or such category of the commercial purposes, other than using the name and address of any political committee to solidit contributions from such Reports and Statements may not be sold or used by any person for the purpose of soliditing contributions from such Reports and Statements may not be sold or used by any person for the purpose of soliditing contributions from such committees.    Author Of Committee (in Full)   Interest Middle initials			
ANY INTERMEDIAL COOKER FRONTE and Statements may not be sold or used by any person for the purpose of soliciting contributions for or commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS  Full Name (Last, First, Middle Initial)  A. SPEPACE CLAY TON  Mailing Address 28 39 OAK WOOD ST.  City PORTAGE IN Y6368  Purpose of Disbursement 15 PR - 8 BALL TOUREY CO.  Candidate Name  MARK J. LEYVA Caregory  Office Sought: Note of Disbursement For:  Sanate President  State: IN Destrict: 01  Mailing Address 2217 MICHAEL DR  Candidate Name  MARK J. LEYVA  Office Sought: Note of Disbursement For:  State Zip Code  N 46368  Purpose of Disbursement  Disbursement For:  State Zip Code  N 46368  Purpose of Disbursement  Disbursement For:  State Zip Code  Office Sought: Note of Disbursement For:  State: IN District: 01  Mailing Address 879 I MONROE AVE  Condidate Name  MARK J. LEYVA  Office Sought: Note of Disbursement For:  Siste Zip Code  N 46368  Amount of Each Disbursement  Date of Disbursement  Disbursement For:  Siste Zip Code  N 46368  Amount of Each Disbursement this Period  Category'  Type  Office Sought: N 400.53  Amount of Each Disbursement this Period  TO Disbursement  Date of Disb	•	for each category of the	(check only one)    X   17   18   19a   19b
NAME OF COMMITTEE (In Full)  COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS  Full Name (List; First, Middle Initial)  A. SPEPARD, CLAYTON  Mailing Address 28 39 OAK WOOD ST.  City PORTAGE IN 76.368  Purpose of Disbursement 15 PP - 8 BAN TOUREY CO. Control of the Co			person for the purpose of soliciting contributions
A. SPEPARD, CLAYTON  Malling Address 2839 OAK WOOD ST.  City PORTAGE IN Y6368  Purpose of Disbursement 1srpl - 8 BAL TOUREY  Office Sought: Shate President State IN District: 01  Full Name (Last, First, Middle Initial)  Candidate Name  MARK J. LEYVA  Category' Type  Clay  Candidate Name  MARK J. LEYVA  Category' Type  Contributions Required Under  State: IN District: 01  Date of Disbursement this Period  Candidate Name  MARK J. LEYVA  Category' Type  Refund or Disposal of Excess Contributions Required Under  11 C.F.R. 400.53  Amount of Each Disbursement  Date of Disbursement  Category' Type  Refund or Disposal of Excess Contributions Required Under  11 C.F.R. 400.53  Amount of Each Disbursement this Period  Category' Type  Refund or Disposal of Excess Contributions Required Under  11 C.F.R. 400.53  Amount of Each Disbursement  Coll AVOVIC ALEX  Malling Address  8 7 9 1 MONROE AVE  City  MUNSTER IN UNSTER IN HOUSE  Candidate Name  MARK J. LEYVA  Category' Type	NAME OF COMMITTEE (in Full)		
B. DORAL, ROBERT  Mailing Address  2217 MICHAEL DR  City PORTAGE IN 46368  Purpose of Disbursement 2 PP PL - 8 BALL TOURNEY  Candidate Name  MARK J. LEYVA  Office Sought: X House President President State: IN District: 01  Full Name (Last, First, Middle Initial)  C. COLAYOVIC, ALEX  Mailing Address  879   MONROE AVE  City MUNSTER IN 46321  Purpose of Disbursement 3 PP L - 8 BALL TOURNEY OO3  Candidate Name  MARK J. LEYVA  Other (specify) Amount of Each Disbursement this Period  Date of Disbursement this Period  Amount of Each Disbursement this Period  President State: IN District: 01  Date of Disbursement this Period  Amount of Each Disbursement Tour Date of Disbursement this Period  Amount of Each Disbursement Dispursement Tour Category/  Type  Office Sought: X House Disbursement For:  Candidate Name  MARK J. LEVVA  Category/ Type  Office Sought: X House Disbursement For:  Senate President State: IN District: 01  Other (specify) General  Other (specify)	Mailing Address 2839 OAKWOOD  City PORTAGE State  Purpose of Disbursement 15-PL - 8 BAU  Candidate Name  MARK J. LE  Office Sought: X House Disbursement F  Senate President Other	ST, Zip Code 46368  Tourey Category Type  or:  ry General	Amount of Each Disbursement this Period  25000  Refund or Disposal of Excess Contributions Required Under
Office Sought: X House Disbursement For: Senate President State: IN District: 01  Full Name (Last, First, Middle Initial)  C. COLAYOVIC, ALEX Mailing Address 8791 MONROE AVE  City State Zip Code IN UNSTER IN Disbursement Tor:  Candidate Name MARK J. LEYVA Category/ Type  Office Sought: X House Disbursement For: Senate Primary General Other (specify) General Other (specify) Affect  State: IN District: 01  Office Sought: X House Other (specify) Affect Other (specify) Affect Other (specify) Affect Other (specify) Affect  Category/ Type  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	Full Name (Last, First, Middle Initial)  B. DORAL, ROBE  Mailing Address  2217 MICHAEL  City PORTAGE IN	RT Dr Zip Code 46368	Amount of Each Disbursement this Period
C. COLAKOVIC, ALEX  Mailing Address  8791 MONROE AVE  City State Zip Code  IN 46321  Purpose of Disbursement  Purpose of Disbursement  3PPL - 8 BALL TOURNEY  Candidate Name  MARK J. LEYVA  Office Sought: X House Senate Primary General  President State: IN District: 01  Date of Disbursement  MMZ/ DO 2013  Amount of Each Disbursement this Period  Category/ Type  Refund or Disposal of Excess  Contributions Required Under  11 C.F.R. 400.53	Office Sought: X House Disbursement F Senate President Other	or:  General	Refund or Disposal of Excess Contributions Required Under
Purpose of Disbursement    State   Zip Code   1N   46321	COLAKOVIC, AL	EX E AVE	
State: IN District: 01 of Year	Purpose of Disbursement  Purpose of Disbursement  Candidate Name  MARK J. LE  Office Sought: x House  Senate  Disbursement F	Zip Code 46321  ALC TOURNEY Category Type For:  General	Refund or Disposal of Excess Contributions Required Under

# 3031060918

### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

	FOR LINE	NUMB	ER:	PAGE	<b>3</b> c	F 4
	(check on	ly one)				
1	2	17	18		19a	19b
		20a	20b		20c	21

1.1	EMIZED DISBURSEMENTS	Detailed Summar		X 17   20a	18 20b	19a 20c	19b		
	y information copied from such Reports and Statements or for commercial purposes, other than using the name and			on for the purp	ose of solic	iting contrib	utions		
1	NAME OF COMMITTEE (In Full)								
$\rangle$	COMMITTEE TO ELECT LEYVA FOR U.S.	CONGRESS					_		
	Full Name (Läst, First, Middle initial)								
Α.	SHEPARD, CLAY	TON		Date of Disb		₹	<b>.</b>		
•	Mailing Address 2839 OAKWOOD	ST		0.3	1.0	20.1.	<b>ろ</b> 。 ———		
	City PORTAGE State	Zip Code 46368	3	Amount of E	ach Disburse		Period		
	Purpose of Disbursement 1ST PL - 8 BALL =	TOURNEY	0.0.3		androden T	250.	0 0		
	Candidate Name MARK J. LEY		Category/ Type		und or Disp				
	Office Sought: X House Disbursement For Senate Primary	General			ntributions R C.F.R. 400.5		der		
	State: IN District: 01 Other (s	epecify) of y	ear						
	Full Name (Last, First, Middle Initial)			D. (D)			-		
В.	ANDRAS, JERA	2		Date of Disb	ursement	ويصدوندون			
	Mailing Address  3009 CAPPELLE City State	,	NE	03	ا رقرر	201	3		
	State  State  State	Zip Code		Amount of E			Period		
	Purpose of Disbursement 2 MP PL - 8 BALL		003			/as,	9.0		
	Candidate Name WARK J. LEY		Category/ Type						
	Office Sought: X House Disbursement For Senate Primary	:	7,-	Co	iund or Disp ntributions F C.F.R. 400.5	Required Un			
	State: IN District: 01		ear		0.1.11, 400.0				
<del></del>	Full Name (Last, First, Middle Initial)				<del></del> -	·····			
C.	VETTAS, TASOS			Date of Disb	ursement				
	Mailing Address 875 W. 70TH	AVE.		0.3	10	Z0.1	3		
	MERRIUVIUE IN	р Code 46410		Amount of E	ach Disburs		Period		
	Purpose of Disbursement 3 PP PL - 8 BAU	TOURNEY	0.03		\	75.	0,0		
	Candidate Name  WARK J. LET	YVA	Category/ Type	5-	fund of Di-	one) of Foo			
	Office Sought: X House Disbursement For Senate Primary			Co	fund or Disp intributions I C.F.R. 400.	Required Ur			
	State: IN District: 01	· L	ear			<del>-</del> -			
s	UBTOTAL of Disbursements This Page (optional)					4,5,0,	0,0		
Г	OTAL This Period (last page this line number only)	· · · · · · · · · · · · · · · · · · ·							

SCHEDULE B	(FEC Form 3)
ITEMIZED DISE	BURSEMENTS

Use separate schedule(s)

**FOR** 

FOR LINE NUMB	ER: LP/	AGE Y	)F <b>Y</b>
(check only one)			
<b>X</b> 17	18	19a	198
20a	20b	20c	21

	EMIZED DISBURSEMENTS	Detailed Summary Page		X 17 20a		18 20b		19a 20c	19b 21
or	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a								
$\rangle$	NAME OF COMMITTEE (In Full)  COMMITTEE TO ELECT LEYVA FOR U.S.	CONGRESS							
Α.	Full Name (Last, First, Middle mitian)  POSTMASTER  Mailing Address		D	ate of Disb			Ž	0.1.	3
	HIGHCHAD BRAN	Zip Code	Aı	mount of E		ALCOLD LIE	4.04.2		
	Purpose of Disbursement  FEC POSTAGE  Candidate Name	Cotoco		andrew Herri D	_		_	5.	15
,	Office Sought:    X   House   Disbursement For	: General		Cor	ntrib		equ	of Exce	
В.	Full Name (Last, First, Middle Initial)  FIRST FINANCIAL E  Mailing Address  300 JHGH ST.  City State		D	ate of Disb	urse Ž	ment	Ż	01	3
	Purpose of Disbursement  BANK SERVICE CE  Candidate Name  MARK J. LEYVA  Office Sought: X House Disbursement For Senate Primary  President State: IN District: 01	Category Type		Co	# (2) fund	or Disp	<i>FR</i> osa Requ	18.	OO ES
C.	Full Name (Last, First, Middle Initial)  Mailing Address		D Executable	m m /	ourse D				
	City State Zi  Purpose of Disbursement  Candidate Name	p Code		mount of E	-	ang ang	en a p		
	Office Sought:    X House   Disbursement For	General	<u>'</u>	_ Co	ontrib		Req	al of Exc uired Ur	
	UBTOTAL of Disbursements This Page (optional)		Laurent Reguent					2.3. 63.	15 15

### SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

PAGE FOR LINE NUMBER:

X	13a
	13b

ANS	Detailed Summary Page (check only one)
ME OF COMMITTEE (In Full)  COMMITTEE TO ELECT LEYVA FOR U.S. CO	NGRESS POST GEN 2012
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:
Leyva, Mark J.	Primary   General
Mailing Address	Other (specify)
10027 4th Street	POST GENERAL
	2 Code 322
and the property of the state o	Balance Outstanding at Close of This Period  -0- ,246.00
	Y Y Y Y
List All Endorsers or Guarantors (if any) to Loan Source	Yes No
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 5 5 -
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 5 5
JBTOTALS This Period This Page (optional)	35,580,60
OTALS This Period (last page in this line only)	•
arry outstanding balance only to LINE 3, Schedule D, for this line	e. If no Schedule D, carry forward to appropriate line of Summary.

# 1303106092

### SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

X <sub>13a</sub>

NAME OF COMMITTEE (In Full)	136
NAME OF COMMITTEE (In Full)  COMMITTEE TO ELECT LEYVA FOR U.S. CONGR	PRE ELECT ZOIZ
LOAN SOURCE Full Name (Last, First, Middle Initial)	icos /
·	Election: Primary
Leyva, Mark J.	General
Mailing Address	Other (specify) V
10027 4th Street	PRE GENERAL
City State ZIP Co Highland IN 46322	•
Original Amount of Loan Cumulative Payment To	
TERMS	
Date Incurred Date Due	A COMPANY OF A COM
N M N D D / Y Y Y Y M M N D D / N	ONE W (apr) X
List All Endorsers or Guarantors (if any) to Loan Source	Yes No
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed
	Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	A
City State ZIP Code	Amount Guaranteed
	Outstanding:
SUBTOTALS This Period This Page (optional)	360.00
TOTALS This Period (last page in this line only)	360,00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If	

CHEDULE C (FEC Form 3)	Use separate schedul	PAGE / OF 2
DANS	for each category of t Detailed Summary Page	the (check only one)
ME OF COMMITTEE (in Full)  COMMITTEE TO ELECT LEYVA FOR U.S	S. CONGRESS	3RD QT 2012
LOAN SOURCE Full Name (Last, First, Middre Initial)		Election:
Leyva, Mark J.		Primary
Mailing Address		General  ✓ Other (specify) ▼
10027 4th Street		OPEN COMMITTEE
City State	ZIP Code	
Highland IN	46322	· · · · · · · · · · · · · · · · · · ·
Original Amount of Loan Cumulative	Payment To Date Bala	ance Outstanding at Close of This Period
, , 400,00	, -0-	, , , 400,00
TERMS Date Incurred	Date Due Interest Rat	e Secured:
ob'3'zoiz ""'°	NONE	, 0 % (apr)
List All Endorsers or Guarantors (if any) to Loan Source	ce	
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed Outstanding:	,
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation .	
	Amount	
City State ZIP Code	Guaranteed Outstanding:	, ,
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount Guaranteed	
. City State ZIP Code	Outstanding:	9.
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation .	
City State ZIP Code	Amount Guaranteed Outstanding:	3 · 1 4
SUBTOTALS This Period This Page (optional)		, ,400.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

### SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 2\_0
FOR LINE NUMBER: (check only one)

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//III				Detailed Summar	y Page	Ç.			13b
AME OF COMMITTEE (In Full		A FOR U.S.	CONGRES	SS		3R Q	T 20	12	
LOAN SOURCE Full Name	(Last, First, Mid	che Initial)		· · · · · · · · · · · · · · · · · · ·	Ele	ction:			
Leyva,	Mark J.					Primary General			
Mailing Address	4th Street					Other (spe		mTI	CE
City		State	ZIP Code	<del></del>					
Highlan	d	IN	46322						
Original Amount of Loan		Cumulative Pay	yment To D	ate	Balance	Outstanding	at Close	of This I	Period
<b>9</b> 9	450,00			0-		<b>9</b> ;	, 4	5 Q	00
TERMS Date Incurre			Date Due	Interes	t Rate		Sec	ured:	
09' 10' 3	-012	M M / D D	N	Ď Ň Ĕ		0 % (apr	, 🗆	Yes 2	X No
List All Endorsers or Guar	· · · · · · · · · · · · · · · · · · ·	Loan Source							
1. Full Name (Last, First, I	Middle Initial)			Name of Employer					,
Mailing Address				Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding:	. 3	, ,			
2. Full Name (Last, First, N	liddle Initial)			Name of Employer			<del></del>		
Mailing Address			.	Occupation					
				Amount	<del>.</del>				
City	State	ZIP Code		Guaranteed Outstanding:	7	,	•		
3. Full Name (Last, First, N	fiddle Initial)			Name of Employer					
Mailing Address				Occupation				<del></del>	
City	State	ZIP Code		Amount Guaranteed Outstanding	<b>5</b> ;	<del></del>	u.		
4. Full Name (Last, First, N	fiddle Initial)	<del></del>		Outstanding:  Name of Employer	,,	,	<u>.                                      </u>		
Mailing Address	·	<u> </u>		Occupation					
			-	Amount			<del></del>		
City	State	ZIP Code		Amount Guaranteed Outstanding:	3	9			
	<del></del>	·	<u>l</u>	<del></del>		····	<del></del>	····	
UBTOTALS This Period This	Page (optional)			·····		,	, <b>8</b> £	50.	60
OTALS This Period (last pag	e in this line only	<i>'</i> )	••••••		•	, 3	, <b>8</b> 2 34, 98	8.0.	60
Carry outstanding balance or	nly to LINE 3. Sch	edule D. for thi	s line. If n	o Schedule D. carr	v forward	to approp	riate line (	of Sumo	nain/

# 13031060924

### SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

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/ OF

	Detailed Sufficially Page   13b		
NAME OF COMMITTEE (In Full)	3°DQT 2011		
COMMITTEE TO ELECT LEYVA FOR U.S. CONGR	ESS 9. Q1 2011		
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:		
Leyva, Mark J.	Primary   General		
Mailing Address	Other (specify) ▼		
10027 4th Street	NON RIEUT CYCLE		
City State ZIP Co	de		
Highland IN 46322			
Original Amount of Loan Cumulative Payment To			
, , 100.00	<del>,</del> -0- , , / 0 <i>0.00</i>		
TERMS Date Incurred Date Due	Interest Rate Secured:		
MM/DD/YYY MM/DD/Y	ŎŇĔ . O % (apr)		
List All Endorsers or Guarantors (if any) to Loan Source			
1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
· ·	Amount		
City State ZIP Code	Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed Outstanding:  , , , , , , , , , , , , , , , , , , ,		
SUBTOTALS This Period This Page (optional)			
TOTALS This Period (last page in this line only)			
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

SCHEDULE C	(FEC Form 3)
LOANS	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

X	13a	
$\neg$	13h	

	Detailed Summary Page 13b
AME OF COMMITTEE (In Full)  COMMITTEE TO ELECT LEYVA FOR U.S. CO	ongress 1QT 2011
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:
Leyva, Mark J.	Primary       General
Mailing Address	✓ Other (specify) ▼
10027 4th Street	NON ELECT CYCLE
1 7	P Code 3322
Original Amount of Loan Cumulative Payme	ent To Date Balance Outstanding at Close of This Period
, ,240.00	,-0- , ,2 40, 00
TERMS Date Incurred Date	
03',31' 2011 """'	NONE O % (apr)
List All Endorsers or Guarantors (if any) to Loan Source	Yes No
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
·	Amount
City State ZIP Code	Guaranteed Outstanding:
JBTOTALS This Period This Page (optional)	, ,240.00
OTALS This Period (last page in this line only)	······································
arry outstanding balance only to LINE 3, Schedule D, for this lin	e. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C	(FEC	Form	3)
LOANS			

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

X	13a
7	13h

/ OF

	Detailed Summa	ry Page	(6.1.5.11.5.11.7)	13b
NAME OF COMMITTEE (In Full)			/ST 07	2010
COMITTEE TO ELECT LEYVA FOR U.S. CONGRE	ESS		/st 97	2010
LOAN SOURCE Fult Name (Last, First, Middle Initial)		Ele	ection:	
Leyva, Mark, J.		×	Primary General	
Mailing Address			i Other (specify	<i>(</i> ) <del>-</del>
10027 4th Street		_		
City State ZiP C	Code	<del></del>		
Highland IN 463	322			
Original Amount of Loan Cumulative Payment	To Date	Balance	Outstanding at	Close of This Period
, ,500 .00 ,	,0-		1	,500.00
Date Incurred Date Du	e Interes	t Rate		Secured:
	N O N E	•	0 % (apr)	Yes No
List All Endorsers or Guarantors (if any) to Loan Source			<del></del>	
1. Full Name (Last, First, Middle Initial)	Name of Employer			
Mailing Address	Occupation	<del></del>		
	Amount	<del></del>	<del></del>	·
City State ZIP Code	Guaranteed Outstanding:	,	•	.•
2. Full Name (Last, First, Middle Initial)	Name of Employer		·	<del></del>
Mailing Address	Occupation			<del>,</del>
	Amount			
City State ZIP Code	Guaranteed Outstanding:	,	,	.•
3. Full Name (Last, First, Middle Initial)	Name of Employer			
Mailing Address	Occupation		<del></del>	
	Amount			<del></del>
City State ZIP Code	Guaranteed Outstanding:	,	,	•
4. Full Name (Last, First, Middle Initial)	Name of Employer		<del></del>	<del></del>
Mailing Address	Occupation	·		<del></del>
	Amount			
City State ZIP Code	Guaranteed Outstanding:	,	,	
				_
SUBTOTALS This Period This Page (optional)	<b></b>		, ,	500,00
TOTALS This Period (last page in this line only)	······		. 33,	500.00 790.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If	no Schedule D, carry	forward to		

SCHEDULE	D	(FEC	Form 3)
DEBTS AND	0	BLIGA	TIONS

(Use separate schedule(s) for each numbered line)

PAGE OF FOR LINE NUMBER: (check only one)

X 10

9

<b>Excluding</b>	Loans
NAME OF	COMMITTEE (In

AME OF COMMITTEE (In Full)		IST OF 2012
COMMITTEE TO ELECT LEYV	A FOR U.S. CONGRESS	1 2 L Solo
A. Full Name (Last, First, Middle initial) or Debtor of	r Creditor	Nature of Debt (Purpose):
Mark J. Leyva		(ampitrinting)
Mailing Address 10027 4th Street		Nature of Debt (Purpose):  Camp, Printing  H. P. P.
City State Highland IN	Zip Code 46322	H. P. Y.
Outstanding Balance Beginning This Period	10522	
-0-		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
4200	-0-	4200
B. Full Name (Last, First, Middle Initial) of Debtor of	r Creditor	Nature of Debt (Purpose):
Mark J. Leyva	,	Raffle Certificate
Mailing Address 10027 4th Street		
City State Highland IN	Zip Code 46322	Blyth's Sport Shop
Outstanding Balance Beginning This Period		Lange Company of the
-0-		
Amount Incurred This Period	Payment This Perlod	Outstanding Balance at Close of This Period
2500	-0-	25,00
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):
Mark J. Leyva		Camp. Printing
Mailing Address 10027 4th Street		_
City Highland IN	State Zip Code 46322	H.P.P.
Outstanding Balance Beginning This Period		
-0-		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1.0.7.0.0	-0-	1.0.7.0.0
) SUBTOTALS This Period This Page (optional)		17400
		2296305
2) TOTALS This Period (last page this line number of		3270000
3) TOTAL OUTSTANDING LOANS from Schedule C	(last page only)	33,190.00
ADD 2) and 3) and carry forward to appropriate li	ne of Summary Page (last page only)	56,753.05

### SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

X 13a

		Detailed Summary	Page			13b
NAME OF COMMITTEE (in Full)				2 - 0	_	
COMITTEE TO ELECT LEYVA	FOR U.S. CONGRI	SS	Ų	20 P	200	<b>S</b> .
LOAN SOURCE Full Harne (Last, First, Mil	lddle Initial)	<u> </u>	1	tion:	··	
Leyva, Mark, J.				Primary General		
Mailing Address				Other (spec	ify) 🔻	
10027 4th Street						
City	State ZIP (	Code				
Highland	IN 463	322		·		
Original Amount of Loan	Cumulative Payment	To Date	Balance C	outstanding a	at Close of Th	is Period
, 1,000.00	7	,-0-		,	1, 600	), <u>š</u> o
TERMS Date Incurred	Date Du	ue Interest	Rate		Secured:	
M M / D D / Y Y Y	M M / D D /	N O N E	. 0	) % (apr)	Yes	X
List All Endorsers or Guarantors (if any)	to Loan Source					
1. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation		·		
		Amount	***************************************		<del></del>	
City State	ZIP Code	Guaranteed Outstanding:	,	,	•	
2. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation		<del></del>	<del></del> -	
		Amount			· — — — — — — — — — — — — — — — — — — —	
City State	ZIP Code	Guaranteed Outstanding:	. 9	,	•	
3. Full Name (Last, First, Middle Initial)		Name of Employer			<del></del>	
Mailing Address	· · · · · · · · · · · · · · · · · · ·	Occupation	<del></del>		······································	
		Amount	<del></del>	<del></del>	<del></del>	
City State	ZIP Code	Guaranteed Outstanding:	,	•	•	
4. Full Name (Last, First, Middle Initial)	<del></del>	Name of Employer	<del></del>			
Mailing Address		Occupation		<del></del>		
		Amount			- <del></del>	
City State	ZIP Code	Guaranteed Outstanding:	. 1	,		
SUBTOTALS This Period This Page (optional)		<b>&gt;</b>		, 1	,0100 .	00
TOTALS This Period (last page in this line only	/)	······		, 33	,000 . ,290 .	00
Carry outstanding balance only to LINE 3, Sch	edule D, for this line. I	f no Schedule D. carry fo	orward to	appropriate	line of Sum	marv.

CHEDULE D (FEC Form 3)			(Use separate	PAGE OF
BTS AND OBLIGATIONS			schedule(s) for each	FOR LINE NUMBER: (check only one) 9
cluding Loans			numbered line)	10
ME OF COMMITTEE (In Full)				2000000
COMMITTEE TO ELECT I	LEYVA FOR	U.S. CONGRESS		30P 2008
A. Full Name (Last, First, Middle Initial) of Deb	otor or Creditor		Nature of	Debt (Purpose):
Leyva, Mark, J.			Paid	onity Mail FEE
Mailing Address 10027 4th St.	•		10 -	08-2008
City State Highland IN	Zip Cod 46322	9	Cur.	Efith Post offic Fith IN 46319
Outstanding Balance Beginning This Period				,
Amount Incurred This Period	P	ayment This Period	Outstand	ling Balance at Close of This Period
9 4 0	· · · · · · · · · · · · · · · · · · ·	O-Carlos Research		940
B. Full Name (Last, First, Middle Initial) of Debt	or or Creditor		. Nature of	Debt (Purpose):
Leyva, Mark, J.				T DRIVER
Malling Address 10027 4th St.	<u> </u>	**************************************	HEN	ANDS
City State	Zip Cod		l	US Highway 41
Highland IN	46322	<u> </u>	Schen	LERVILLE IN 46375
Outstanding Balance Beginning This Period				
30.79				
Amount Incurred This Period	Р	ayment This Period	Outstand	ling Balance at Close of This Period
2138	environs untile for the fire	•	4 7	, 5217
C. Full Name (Last. First, Middle Initial) of Deb	tor or Creditor		Nature of	Debt (Purpose):
Leyva, Mark, J.				D TRAYS
Mailing Address				6-2008
10027 4th St.		•		ck + JANTII
City Highland	State IN	Zip Code 46322		I CliNE AVE NAND IN 46322
			, , , , , , ,	

	Amount Incurred This Period Payment This Period		Outstanding Bala	ance at Close of This Period
	Amount Incurred This Period Payment This Period	1	· · · · · · · · · · · · · · · · · · ·	, 8898
1)	SUBTOTALS This Period This Page (optional)	<b>&gt;</b>	5 19 50	,119.76
2)	TOTALS This Period (last page this line number only)	<b>&gt;</b>	\$75±	22,489,05
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<b>&gt;</b>	<b>}</b> ~	33,290,00
4)	ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<b>&gt;</b>	<b>y</b> '	55,779,05

Outstanding Balance Beginning This Period

The state of the s

SCHEDULE C (FEC Form 3) LOANS	Use separate schedule(s) for each category of the Detailed Summary Page  PAGE / OF / FOR LINE NUMBER: (check only one)  X 13a 13b
NAME OF COMMITTEE (In Full)  COMITTEE TO ELECT LEYVA FOR U.S	. CONGRESS 3° 07 2008
LOAN SOURCE Fulk Name (Last, First, Middle Initial)  Leyva, Mark, J.	Election: Primary General
Mailing Address  10027 4th Street  State	. ☐ Other (specify) ▼
City State Highland IN	46322
Original Amount of Loan Cumulati	Balance Outstanding at Close of This Period
TERMS  Date Incurred  M M / P P / Y Y Y M M / P P P P P P P P P P P P P P P P P	Yes No
List All Endorsers or Guarantors (if any) to Loan Sc 1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Cod	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer

			<u> l </u>		
Mailing Address			Occupation		
			Amount Guaranteed		
City	State ZIP	Code	Outstanding:	•	•
3. Full Name (Last, Firs	t, Middle Initial)		Name of Employer		
Mailing Address			Occupation	······································	
			Amount		
City	State ZIP	Code	Guaranteed Outstanding:	,	,
4. Full Name (Last, Firs	t, Middle Initial)		Name of Employer		
Mailing Address			Occupation		
			Amount		
City	State ZIP	Code	Guaranteed Outstanding:	•	,
UBTOTALS This Period	This Page (optional)	······		,	1,300.00
OTALS This Period (last	page in this line only)	•••••••••••••••••••••••••••••••••••••••	······	1	32,290.00
arry outstanding balance	only to LINE 3, Schedule E	, for this line.	If no Schedule D, carry fo	orward to a	ppropriate line of Summary.
N023			<u> </u>		
N023				FEC Sch	edule C (Form 3) (Revised 0)

SCHEDULE (	) (Fl	EC	Form	3)
<b>DEBTS AND</b>	OBL	IGA'	TIONS	}

(Use separate schedule(s) for each numbered line) PAGE / OF /
FOR LINE NUMBER:
(check only one) 9

cluding Loans	numbered line)
AME OF COMMITTEE (In Full)	
COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS	3"QT 2008
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Office Depot	09/10/2008
Mailing Address 10332 Indianapolis Blud	COPY FEES
City State Zip Code TN 46322	·
Outstanding Balance Beginning This Period	
home of war the contract the contract of the c	
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
34184	34184
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
GORDON FOOD Service	08/31/2008
AA III. AAA	- / 3// 2001
City State Zip Code  Vermillville IN 46310	PARAde CAULY
Outstanding Balance Beginning This Period	
Tong in Artist Annual British Agent William State of British Annual State of Contract Con	Outstanding Balance at Close of This Period
Amount incurred This Period Payment This Period	maniformal form of water issues and aniestis per reduction between the second to according to
Conservation of the construction and the main street and are and the construction of t	Tomogrammed in the second of t
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Buy Buttos Parts. Com	09/03/2008
Mailing Address 350 S CAmpbell St Unit 3	
City State 7in Code  VALPARAIST IN 46315	Button Parts
Outstanding Balance Beginning This Period	
in der in the the strategic and a constraint of the strategic and	·
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
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TOTALS This Period (last page this line number only)	2236929
TOTAL OUTSTANDING LOANS from Schedule C (last page only)	3229000
ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page on	54659.29

### SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE J. OF J
FOR LINE NUMBER:
(check only one)

X 13a

		Detailed Summary Page	13b
AME OF COMMITTEE (In Full)  COMMITTEE TO ELECT LEYVA FOR U			2ND QT 2008
LOAN SOURCE Full Name (Last, First, Midd	e Initial)		Election:
Mark J. Leyva			Primary  General
Mailing Address 10027 4th Street			Other (specify)  .
J.,	State ZIP Code IN 46322	)	
Original Amount of Loan	Cumulative Payment To D	ate Balan	ce Outstanding at Close of This Period
Date Incurred  Date Incurred  Date Incurred  Date Incurred  Date Incurred  Date Incurred  Market All Endorsers or Guarantors (if any) to	Accord Securitaries Something	Interest Rate	Secured:  % (apr)  Secured:
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	เลือนสายเปลี่ยนเลยเลือนเลยเลยเลี้ยนเลยเลี้ยนเลยเลี้ยนเลยเลี้ยนเลยเลี้ยน เลาร์นเลยเลี้ เลือนสายเปลี่ยนเลยเลี้ยนเลยเลี้ยนเลยเลี้ยนเลยเลี้ยนเลยเลี้ยนเลยเลี้ยนเลยเลี้ยน เลาร์นเลยเลี้ยน
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	anganama ay anamating annantang man tana janan a ng samuning na a ang samuning na a ang samuning ng Manang nikaganaman nanan na Banan a inang sang sang na Papan, saina sang sang sa
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	angamen nganan samanapana na marin no ng na si sa pina magasamag Taganan na
4. Full Name (Last, First, Middle Initial)		Name of Employer	<del></del>
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	Bureally and a Second
SUBTOTALS This Period This Page (optional)  TOTALS This Period (last page in this line only)	<del></del>	- Second	00.00 P P 0.00

SCHEDULE D (FEC Form 3)	(Use separate PAGE / OF 2
DEBTS AND OBLIGATIONS	schedule(s) FOR LINE NUMBER: for each (check only one) 9
Excluding Loans	numbered line)
NAME OF COMMITTEE (In Full)	2ND QT 2008
COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS	2NB & 2008
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Bluehost	5/15/08
Malling Address 1215 North Research Way	Hosting
City State Zip Code OREN UT 84097	
Outstanding Balance Beginning This Period  I 6 8 0  Amount Incurred This Period  Payment This Period	Outstanding Balance at Close of This Period
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
GORDON FOOD SERVICE	
Mailing Address 1601 W 81st AUÉ  City State Zip Code  Merellluille IN 46410	b/19/08 - 120.54 6/27/08 - 115.54
Outstanding Balance Beginning This Period  23608  Amount Incurred This Period Payment This Period  23608	Outstanding Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	Parade prep. Material
City State Zip Code	6-25-08
Shererville IN 46375	
Outstanding Raiance Beginning This Period 2720	
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
2.720	2.720
1) SUBTOTALS This Period This Page (optional)	43008
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page of	only)

SCHEDULE	D	(FEC	Form 3)	
<b>DEBTS AND</b>	OE	BLIGA	TIONS	

(Use separate

EBTS AND OBLIGATIONS	for each (check only one) 9
xcluding Loans	numbered line) 10
NAME OF COMMITTEE (In Full)	2ND QT 2008
COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS	2,5 4, 5,6
A. Full Name (Last, First, Middle initial) of Debtor or Creditor	Nature of Debt (Purpose):
Schilling Bros. Lumber  Mailing Address  8900 Wicker Aue (US41)  City State  Zip Code  SAINT JOHN IN 46373	Parade prep. Nateural 6/25/08
Outstanding Balance Beginning This Period	
Amount Incurred This Period Payment This Period  9 5 3 2	Outstanding Balance at Close of This Period
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Menands	Parade Par Maleural
Mailing Address  1000 US Highway 41  City State Zip Code  Scherenville In 46375	6/27/08
Outstanding Balance Beginning This Period  3079  Amount Incurred This Period  3079  Payment This Period	Outstanding Balance at Close of This Period
C. Full Name (Lest, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purposa):
Menards  Mailing Address 6050 West Ridge Road  City State Zip Code IN 46408	Parade Prep Material 16/28/08
Outstanding Balance Beginning This Period	
26684	
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
26684	2.6.6.8.4
1) SUBTOTALS This Period This Page (optional)	3,9,2,9,5
2) TOTALS This Period (last page this line number only)	>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	3099000
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page of	only) > 5 . 2 . 4 . 6 . 2 9 6

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### SCHEDULE C (FEC Form 3)

Use separate schedule(s) FOR LINE NUMBER:

PAGE

F OF

OANS	·			for each categor Detailed Summa		(check only	one)	<b>X</b> 13a
NAME OF COMMITTEE (In	Full)	-				, ,	C 2 =	- 0
COMITTEE TO	ELECT LEYVA	FOR U.S.	CONGRESS			16	·P 20	
LOAN SOURCE Ful N	arne (Last, First, Mir	ddle Initial)				ction:		
Leyva,	Mark, J.				×	Primary General		
Mailing Address						Other (specif	y) <b>▼</b>	
10027 4	4th Street							<del></del> ,
City		State	ZIP Code					
Highlan	.d	IN	46322	· ·				
Original Amount of Loa		Cumulative	Payment To D	_	Balance (	Outstanding at		
,	, 100.00		, , ,	-0-		•	, 1 00	, 00
TERMS Date Incu	urred		Date Due	Interes	st Rate	<del></del>	Secure	<del>1</del> :
M M / D D /		M M / D	D / Y Y	, A A		<b>.</b>	~~	
				ON E		) % (apr)	Yes	X No
List All Endorsers or G		o Loan Source		·		<del></del>		
1. Full Name (Last, Firs	it, Middle Initial)		"	Name of Employer				
Malling Address				Occupation				
		70.0-4-	i -	Amount Guaranteed			· · · · · · · · · · · · · · · · · · ·	<del></del>
City	State	ZIP Code		Outstanding:	,	,	•	
2. Full Name (Last, First	, Middle Initial)		N	Name of Employer	<del></del>	<del></del>		
Mailing Address			C	Occupation				
City	State	ZIP Code	G	Amount Guaranteed Dutstanding:	,	,		
3. Full Name (Last, First,	, Middle Initial)		N	lame of Employer	······································		<del></del>	
Mailing Address			C	Occupation	·			<u> </u>
			A	\mount	<del></del>		<del></del>	
City	State	ZIP Code	O	Buaranteed Outstanding:	1	,	•	
4. Full Name (Last, First,	Middle Initial)		N	lame of Employer				
Mailing Address			0	Occupation				
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City	State	ZIP Code	J	iuaranteed outstanding:	,	,	•	ļ
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Carry outstanding balance of	only to LiNE 3, Schr	edule D, for th	nis line. If no	Schedule D, carry	forward to	appropriate	line of Sur	mmary.

SCHEDULE D	(FEC Form 3)
DEBTS AND O	BLIGATIONS
<b>Excluding Loans</b>	

(Use separate schedule(s) for each numbered line)

PAGE 1 OF FOR LINE NUMBER:

(check only one)

Villaining 1941.	
AME OF COMMITTEE (In Full)  COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS	12-P 2008
	Nature of Debt (Purpose):
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	· · · ·
Office Depot	4/3/08
Mailing Address	Camp. FlyerPrinting
City State 1 Englanapoli's Blvd	, , , , , , , , , , , , , , , , , , ,
Highland IN 46322	
Outstanding Balance Beginning This Period	
2039589	
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
	Samuelanni demondant demondant demondant de la company de
9.780	20,4,9,3,6,9
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
1 am That	4/10/08
Mailing Address	Card Stock
City State O Indianapolis Blud.	Card Stock
	<u></u>
Outstanding Balance Beginning This Period	
2049369	
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
9624	2058993
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
	4/15/08
Mailler Address	
Mailing Address 1109 W. 72 Circle	Flyer Printing
City State Zip Code	,
Werrillville IN 46410	
Outstanding Balance Beginning This Period	
20.58993	
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Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
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Amount Incurred This Period  Payment This Period  SUBTOTALS This Period This Page (optional)	2.0.64.9.9.3

SCHEDULE C	(FEC. Form	3)
LOANS	•	

Use separate schedule(s) FOR LINE NUMBER:

PAGE

OANS					category Summan		(check or	nly one)	X	13a 13b
IAME OF COMMITTEE (In	Full)						1-4	- от 2000	`	
COMITTEE TO	ELECT LEYVA	FOR U.S. CON	GRESS				151	t QT 2008	,	
LOAN SOURCE Full N	arne (Last, First, Mic	ddle Initial)				1	ction:			
Levva,	Mark, J.					X	Primary General			
Mailing Address						─  }	Other (spe	cify) 🖝		
1	th Street							<i></i>		
City		State 2	IP Code			- <del></del>	<del></del>			
Highlan	d	IN	46322			-				
Original Amount of Loa	n	Cumulative Paym	ent To Da	ate		Balance (	Outstanding	at Close of	This	Period
2	, 0 0 0, 00	· <b>j</b> i	<b>,</b> .	0-			,	2,000	)_ (	0 0
TERMS Date Inc.			Due '		Interest	Rate		Secure	d:	
0.3 19,	2.008	M M / D D	N C	N E			0 % (apr)		5	<b>X</b>
		<u> </u>				<u> </u>	- 70 (apr)	Yes		No
List All Endorsers or G  1. Full Name (Last, First		D LOZII Source	IN	lame of Er	molover					
1. 7011 140110 (2001, 1110										•
Mailing Address				occupation						
				mount Juaranteed						
City	State	ZIP Code		outstanding	•	,	,	•		
2. Full Name (Last, First	, Middle Initial)		.	lame of En	nployer					
Mailing Address			C	ccupation			· · · · · · · · · · · · · · · · · · ·		<del></del>	
				mount		<del></del>		<del></del>		
City	State	ZIP Code		iuarant <del>ee</del> d Jutstanding		,		-		
3. Full Name (Last, First,	Middle Initial)		N	ame of En	nployer					
Mailing Address			0	ccupation						
			Ā	mount						
City	State	ZIP Code	4	uaranteed utstanding	:	,	<b>5</b> -	•		
4. Full Name (Last, First,	Middle Initial)		N	ame of Em	nployer					
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City	State	ZIP Code		uaranteed utstanding:	:.	,	,	•		
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arry outstanding balance	only to LINE 3, Sche	edule D, for this lin	e. If no	Schedule I	D. carry 1	orward to	appropria	te line of Su	mm:	arv.

SCHEDULE D (FEC Form 3)	(Use separate	PAGE 1 OF 1		
DEBTS AND OBLIGATIONS	schedule(s)	FOR LINE NUMBER:		
Excluding Loans	for each numbered line)	(check only one) 9		
NAME OF COMMITTEE (In Full)	<u>.</u>			
COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS		1st QT 2008		
A. Full Name (Last, First, Middle initial) of Debtor or Creditor	Nature of D	ebt (Purpose):		
	Butto	n Parts 1/31/08		
BuyButtonParts.com  Mailing Address	·	\$62.54		
350 S, Campbell St., Unit #3		100.0		
City State Zip Code				
Valparaiso IN 46385				
Outstanding Balance Beginning This Period				
20,333.35				
Amount Incurred This Period Payment This Period	Outstandi	ng Balance at Close of This Period		
62.54	حصا لحت	20,395,89		
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of D	ebt (Purpose):		
Mailing Address		•		
City State Zip Code				
Outstanding Balance Beginning This Period				
Amount Incurred This Period Payment This Period	Outstandi	ng Balance at Close of This Period		
· Linearina Linearina				
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of D	Pebt (Purpose):		
	.			
Matter				
Mailing Address				
City State Zip Code				
Outstanding Balance Beginning This Period		·		
Amount Incurred This Period Payment This Period	Outstandi	ng Balance at Close of This Period		
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1) SUBTOTALS This Period This Page (optional)	<b>&gt;</b> <u> </u>			
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3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	>	2.9, 1.9.0.0.0		

ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

SC	CHEDULE D (FEC Form 3)	(Use separate	PAGE OF I
	BTS AND OBLIGATIONS	schedule(s)	FOR LINE NUMBER:
	cluding Loans	for each numbered line)	(check only one) g
_	ME OF COMMITTEE (In Full)		
	COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS		3RD QT 2007
	A. Full Name (Last, First, Middle initial) of Deptor or Creditor	Nature of D	Pebt (Purpose): 09/01/07
	laura la la T	Camp	o, C.C. Payments
	Mailing Address	7/11 -	bet (Purpose): 09/07/07  C.C. Payments  \$ 273
	10027 4th Street	8/6 -	#270
	City State Zip Code 146322		\$ 300
	Outstanding Balance Beginning This Period	Pers	onal Check
	21,1,7,3,3,5	•	
	Amount Incurred This Period Payment This Period	Outstandi	ng Balance at Close of This Period
	843.	00	20,330.35
	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of D	Pebt (Purpose):
		7.44.67.67.6	root (r diposoji
	Mailing Address		
	Manual Valuese		
	City State Zip Code		
•	Outstanding Balance Beginning This Period		
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	Amount Incurred This Period Payment This Period	Outstandi	ng Palanco et Class of This Deviced
	Allouit incured this relied Payment this relied		ng Balance at Close of This Period
i			The state of the s
	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of D	ebt (Purpose):
			, , , , , , , , , , , , , , , , , , ,
	Mailing Address		
	City State Zip Code		
	Outstanding Balance Beginning This Period		
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	Amount Incurred This Period Payment This Period	Outstandi	ng Balance at Close of This Period
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1)	SUBTOTALS This Period This Page (optional)	> I	my Gamabian Lan- Gambas done Gamabas and
2)	TOTALS This Period (last page this line number only)		20,330,35
		A course to be a court from	7 10/7 00
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)	P I de mar la	And the second s
4)	ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page on	ıly) 🕨 🐰 ,	47,52035

SCHEDULE C (FEC Form 3) LOANS	Use separate schedule(s) for each category of the Detailed Summary Page  PAGE 1 OF 1  FOR LINE NUMBER: (check only one)
NAME OF COMMITTEE (In Full)  COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS	240 QT 2007
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:
Mark J. Leyva	Primary General
Mailing Address 10027 4th Street	Other (specify) ▼ Non-Election
City State ZIP Co	ode .
Highland IN 4632	2
Original Amount of Loan Cumulative Payment To	Date  Balance Outstanding at Close of This Perio
300.00	-0 300.00
TERMS Date incurred Date Due	Interest Rate Secured:
0.5 / 2.1 / 2.0.0.7 M.M. / D.D. / N	ONE . 0% . % (apr) No X
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount accompanies acceptance and accompanies
City State ZIP Code	Guaranteed Outstanding:
SURTOTALS This Period This Page (optional)	3 0 0 0 0

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

TOTALS This Period (last page in this line only).....

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS	(Use sepal schedule for each	(s) FOR LINE NUMBER:
Excluding Loans	numbered	line) 10
NAME OF COMMITTEE (In Full)	200	2 ND QT 2007
COMMITTEE TO ELECT LEYVA FOR U.S. CONGR		re of Debt (Purpose):
A. Full Name (Last, First, Middle initial) of Débtor or Creditor		EC Postage _ 5/17/07
Leyva, Mark, J.		aid Cash
Mailing Address 10027 4th Street		
City State Zip Code Highland IN 46322		•
Outstanding Balance Beginning This Period		
2.0.5.5.2.7.0  Amount Incurred This Period Payment This Period	iod . Out	tstanding Balance at Close of This Period
1 4.4 0 -0-		2 0, 56 7 .1 0
Committee and the continue of	- Annahamban La	2 0/ 30 / .1 0
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Natu	re of Debt (Purpose):
Leyva, Mark, J.		CC Postage - 5/30/07
Mailing Address 10027 4th Street	Ρ̄̄̄̄̄̄̄̄̄̄̄	aid Cash
City State Zip Code		
Highland IN 46322		
Outstanding Balance Beginning This Period		
20,567.10		
Amount incurred This Period Payment This Per	no poi	tstanding Balance at Close of This Period
1 6. 25	0	20,583.35
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Natu	re of Debt (Purpose):
Leyva, Mark, J.	Ca	amp. CC Payment - 6/07/07
Mailing Address 10027 4th Street	Pe	ersonal Check \$290.00
City State Zip Code Highland IN 46322		amp. CC Payment - 4/17/07 amp. Check \$300.00
Outstanding Balance Beginning This Period  20,583.35		
Amount Incurred This Period Payment This Per	iod Ou	tstanding Balance at Close of This Period
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2) TOTALS This Period (last page this line number only)	<b>&gt;</b>	21, 173 35

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

#### SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the

PAGE OF FOR LINE NUMBER: (check only one)

X 13a

ANS	Detailed Summary Page 13b
ME OF COMMITTEE (In Full)	
COMITTEE TO ELECT LEYVA FOR U.S. CONGR	1 ST QT 2007
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:
Leyva, Mark, J.	Primary
Mailing Address	General    X Other (specify) ▼
10027 4th Street	Non-Election
City State ZIP	Code
Highland IN 46	5322
Original Amount of Loan Cumulative Payment	t To Date Balance Outstanding at Close of This Period
, ,200.00	,-0-
TERMS Date Incurred Date I	Due Interest Rate Secured:
Ö1 <sup>M</sup> ′ 1 1 ′ 2 ŏ ŏ 7 ′ M M ′ 1 ° ° ′	NONE . 0 % (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
·	Amount
City State ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
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### SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 2

X 13a

			Detailed Summar	y rage			13b
AME OF COMMITTEE (In Full)					10-5	\T	
COMITTEE TO ELECT LEYVA	FOR U.S.	CONGRESS	<b>S</b>		131 6	2T 200	7
LOAN SOURCE Full Name (Last, First, M	liddle Initial)	-		Ele	ction:		
Leyva, Mark, J.					Primary General		
Mailing Address	<del></del>			V	Other (spec	ifv) 🔻	
10027 4th Street						Election	1
City	State	ZIP Cod	le	<del></del>		··	
Highland	IN	46322					
Original Amount of Loan	Cumulative F	Payment To	Date	Balance	Outstanding	at Close of T	his Period
, , 200.00		,	-0-		,	,200.	. 0 0
TERMS  Date Incurred		Date Due	Interest	Rate		Secured	 l:
0 2 0 5 2 0 0 7	M M / D		Ŏ Ň Ĕ	•	0 % (apr)	Yes	X
List All Endorsers or Guarantors (if any)	to Loan Source	:e	<del></del>				140
1. Full Name (Last, First, Middle Initial)	•		Name of Employer				
Mailing Address			Occupation		<del></del>		
			Amount				
City State	ZIP Code		Guaranteed Outstanding:	5	,	•	
2. Full Name (Last, First, Middle Initial)			Name of Employer				<del>-,</del>
Mailing Address			Occupation				
	<del></del>		Amount			<del></del>	
City State	ZIP Code		Guaranteed Outstanding:	9.	,	•	
3. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
	··		Amount				
City State	ZIP Code		Guaranteed Outstanding:	5	5	•	
4. Full Name (Last, First, Middle Initial)			Name of Employer		<del></del>		<del></del>
Mailing Address			Occupation				
			Amount		<del></del>		
City State	ZIP Code		Guaranteed Outstanding:	,	,	•	
						<del></del>	<u> </u>
SUBTOTALS This Period This Page (optional)	)		<b>&gt;</b>		,	, 2 0 0	.0 0
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#### SCHEDULE C (FEC Form 3) LO

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 3

ANS				ummary Page		(check only	one)	X 13	
ME OF COMMITTEE (In Full)						/ S7	QT Z	007	
COMITTEE TO ELECT LEY	VA FOR U.S.	CONGRESS				<b>'</b>	GE 1		
LOAN SOURCE Full Name (Last, First,	Middle Initial)				Election	on:			
Leyva, Mark, J.					<b>—</b>	rimary ieneral			
Mailing Address	_				x o	ther (speci	fy) ₩		
10027 4th Street				]		Non-	Election	<u>n</u>	
City	State	ZIP Code	<del></del>						
Highland	IN	46322							
Original Amount of Loan	Cumulative f	Payment To D	ate	Balar	nce Ou	tstanding a	at Close of	This Per	riod
, ,200,0	ο,	,	-0-			,	,200	,0 0	,
TERMS Date Incurred		Date Due		Interest Rate			Secure	d:	
0 2 0 8 2 0 0 7	M M / O	N	ŇĚ	•	0	% (apr)	Ye	x X	No
List All Endorsers or Guarantors (if ar	ny) to Loan Source	e	,						- 12
1. Full Name (Last, First, Middle Initial)			Name of Emp	oloyer				•	
Mailing Address			Occupation						
		1	Amount						
City Stat	e ZIP Code		Guaranteed Outstanding:		5.	5	•		
2. Full Name (Last, First, Middle Initial)			Name of Emp	oloyer					
Mailing Address		1	Occupation						
			Amount						
City Stat	e ZIP Code	J.	Guaranteed Outstanding:	٠	,	5	•		
3. Full Name (Last, First, Middle Initlal)			Name of Emp	oloyer					
Mailing Address			Occupation						
·			Amount						
City Stat	e ZIP Code	1	Guaranteed Outstanding:		7	1	•		
4. Full Name (Last, First, Middle Initial)			Name of Emp	loyer		·			
Mailing Address	·	1	Occupation				<del></del>	<del></del>	
		ļ.	Amount						
City Stat	e ZIP Code		Guaranteed Outstanding:		,	<del>,</del>	•		
	-					·			
JBTOTALS This Period This Page (option	nal)		·····	<b>&gt;</b>		,	,200	, 0 (	0
OTALS This Period (last page in this line	only)	·····		<b>&gt;</b>		,	,	•	
arry outstanding balance only to LINE 3,	Schedule D, for t	his line. If no	Schedule D	, carry forwa	ard to	appropria	te line of S	umman	y.

### SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

X 13a

		Dotailed Carringly Fage	<u> </u>		13b	
NAME OF COMMITTEE (In Full)						
COMITTEE TO ELECT LEYVA FOR U.S. CONGRESS						
LOAN SOURCE Full Warne (Last, First, Middle I	nitial)		Election:			
Leyva, Mark, J.			Primary General			
Mailing Address	<del></del>		X Other (speci	fy) ₩		
10027 4th Street				-Election		
City Stat	e ZIP Code	)				
Highland IN	46322					
Original Amount of Loan Cu	mulative Payment To D	ate Balan	ce Outstanding a	at Close of Thi	s Period	
, , 29000	, , ,	-0-	3	,290.	0 0	
TERMS Date Incurred	Date Due	Interest Rate		Secured:		
03 06 2007		ĎŇĚ .	0 % (apr)	Yes	X	
List All Endorsers or Guarantors (if any) to Loa	an Source			163	No	
Full Name (Last, First, Middle Initial)	}	Name of Employer	•			
Mailing Address		Occupation				
	<del>                                     </del>	Amount		<del></del>		
City State ZI	r coue	Guaranteed Outstanding:	, ,	•		
2. Full Name (Last, First, Middle Initial)	1	Name of Employer		<del></del>		
Mailing Address		Occupation			<del>,</del>	
		Amount				
City State ZI		Guaranteed Dutstanding:	, ,	•		
3. Full Name (Last, First, Middle Initial)	1	Name of Employer				
Mailing Address	(	Occupation				
		Amount	·			
City State ZII	~~~	Guaranteed Dutstanding:	, ,	•	•	
4. Full Name (Last, First, Middle Initial)	ı	Name of Employer				
Mailing Address	(	Decupation				
	A	Amount				
City State Zif	-	Guaranteed Outstanding:	,	•		
subtotals This Period This Page (optional), , 8 9 0. 0 0						
TOTALS This Period (last page in this line only)						
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.						

ANS	Form 3)		Use separate sche for each category	of the (check only one) X 13a
			Detailed Summary	Page 13b
ME OF COMMITTEE (In F	•	U.S. CONGRES	S	1 ST QT 2007
LOAN SOURCE Full Na	me (Last, First, Mid	dle Initial)		Election:
Mark J	. Leyva			Primary General
Mailing Address				Other (specify) ▼     Previous Election
10027 4	4th Street			Previous Election
City			IP Code	
Highlar 	na 	IN 4	6322	·
Original Amount of Loan	egystellikyskylännessylkystäninylänessylkysänätyj	Cumulative Paym	ent To Date	Balance Outstanding at Close of This Period
26,	000.00	المسك سلساني	-0-	, 2,6,,0,0,0,0,0
TERMS Date incu	red	Dat	Due Interest	Rate Secured:
'management (Allermanian)	2002 -	M M / D D		
Ironandamund Sanoviloustid &	and the second second	2 3.1	2.0.06	0% % (apr) No X
List All Endorsers or Gu		Loan Source	None of Frederica	·
1. Full Name (Last, First	, Middie Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount	iki kati jamatungitika ini jamata jiji kerinti jamiting "minari; mina tampish ting, sankhid
City	State	ZIP Code	Guaranteed Outstanding:	an conference Marcon decrease felocate Marcon discount of the contract of the
2. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address		•	Occupation	· · · · · · · · · · · · · · · · · · ·
•			Amount	للمنظ من المنظم المنظمة
City	State	ZiP Code	Guaranteed Outstanding:	and an afternation of the second
3. Full Name (Last, First,	Middle Initial)		Name of Employer	A marketing and the state of th
5. Full Name (Last, Flist,	windate filitialy		Name of Employer	·
Mailing Address			Occupation	
				tankan dankan persaman antang persama dankan ang kananan - 1 ta at at an an antang an an antan at a persamble Tankan dankan persaman antang persama dankan ang kananan - 1 ta at at an antang an an antang an an an an an an
City	State	ZIP Code	Guaranteed Outstanding:	nankonsi Braidenako m. Basarina mina Brandinard
4. Full Name (Last, First,	Middle Initial)	<del> </del>	Name of Employer	
Mailing Address			Occupation	
			Amount	many managaming and actification group with the state of color of the set
City	State	ZIP Code	Guaranteed	),

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SUBTOTALS This Period This Page (optional).....

TOTALS This Period (last page in this line only).....

#### SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

(Use separate schedule(s) for each numbered line)

PAGE 1 FOR LINE NUMBER: (check only one)

 9
10

OF 1

**Excluding Loans** 

NAME	OF	COMMITT	EE	(in Full)

	COMMITTEE TO ELECT	LEYVA FOR U.S. CONGRESS	13, 61 5001
	A. Full Name (Last, First, Middle initial) of	Debtor or Creditor	Nature of Debt (Purpose):
ļ	Leyva, Mark J.		Campaign Debt
	Mailing Address 10027 4th Street		Campaign Desc
	City State Highland IN	Zip Code 46322	
l	Outstanding Balance Beginning This Period	od ===	
1	2.1, 2.4.2.7	0	
1	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
	-O-	6,90.00	, , , 2 0,5 5 2, 7 0
ſ	B. Full Name (Last, First, Middle Initial) of C	Debtor or Creditor	Nature of Debt (Purpose):
	Mailing Address		
-	City State	Zip Code	·
	Outstanding Balance Beginning This Period  Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
	C. Full Name (Last, First, Middle Initial) of	Nature of Debt (Purpose):	
Ì	Mailing Address		
Ì	City	State Zip Code	
	Outstanding Balance Beginning This Period  Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
			ing a second second respective to the second
1)	SUBTOTALS This Period This Page (option	nalj	mountement promise many in magical promise manufactured from the promise of pour con-
2) TOTALS This Period (last page this line number only)			20,552.701
3)	TOTAL OUTSTANDING LOANS from Sche	26,890.00	
4)	ADD 2) and 3) and carry forward to appro	priate line of Summary Page (last page only)	47,442.70

### **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

DATE PREPARED

(3/2005)

PREPARER